DOCUMENT RESUME

ED 310 335 CG 021 911

AUTHOR Stanley, Patricia D.
TITLE Preferred Traditional and Creative Behavioral Intervention Techniques Employed by School Psychologists in Louisiana.
PUB DATE Sep 89
NOTE 15p.; Paper presented at the Annual Meeting of the Southwestern Psychological Association (35th, Houston, TX, April 13-15, 1989).
PUB TYPE Reports - Research/Technical (143) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Behavior Modification; Consultation Programs; *Counseling Effectiveness; *Counseling Techniques; Elementary Secondary Education; Exceptional Persons; Individual Counseling; *Intervention; Reinforcement; School Counseling; *School Psychologists
IDENTIFIERS *Louisiana

ABSTRACT

A major emphasis in Louisiana school psychologists' jobs involves interventions with, and evaluations of, children classified as behavior disordered, learning disabled, and mildly mentally handicapped, as well as by regular education students. In assessment, both traditional and behavioral instruments are employed. In intervention, the emphasis is on behavioral techniques. The purpose of this study was to identify favored intervention techniques currently being implemented by school psychologists practicing in Louisiana. In order to identify both traditional favorites and creative interventions, questionnaires were mailed to 147 school psychologists with 39 usable responses returned. Questionnaires included demographic data, estimated time spent serving specific groups and performing certain tasks, and specific examples of both traditional and creative behavioral interventions which the school psychologist found effective. Individual counseling, general behavior modification, reinforcement of appropriate behaviors/academic success, and consultation were among the most frequently mentioned interventions. Least favored were relaxation, overcorrection, response cost, group counseling, token economy, and cognitive behavior modification. (ABL)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED310335

Preferred Traditional and Creative Behavioral Intervention Techniques Employed by School Psychologists in Louisiana

Patricia D. Stanley, Ph.D.

Louisiana State University - Shreveport

CG 021911

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Patricia D Stanley

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

Submitted September 8, 1989

Running head: PREFERRED INTERVENTIONS

BEST COPY AVAILABLE

Preferred Traditional and Creative Behavioral Intervention Techniques Employed by School Psychologists in Louisiana

Patricia D. Stanley, Ph.D.
Louisiana State University - Shreveport

Abstract

School psychologists practicing in Louisiana were surveyed to determine behavioral interventions most effective, and therefore preferred, when addressing problems exhibited by children classified as Behavior Disordered, Learning Disabled, and Mild Mentally Handicapped, as well as by regular education students. Descriptions of both traditional and creative interventions were sought. Overall preferences were identified, as were preferences specific to various classifications of exceptionality.

Preferred Traditional and Creative Behavioral Intervention Techniques Employed by School Psychologists in Louisiana

The model according to which school psychological services are delivered in Louisiana is detailed in the Pupil Appraisal Handbook (State of Louisiana Department of Education, 1983). This document, which closely follows and clearly defines requirements set forth in P.L. 94-142, was first implemented in 1981. According to these requirements, school psychologists serve as members of multidisciplinary teams which are based in each parish, sometimes in individual schools and sometimes in a central location. A major emphasis in the school psychologists' job involves interventions with and evaluation of children who are suspected of being exceptional. Preferral interventions are emphasized for these children, and this idea has been extended to include interventions aimed at primary prevention with regular education students who clearly will not meet criteria for classification as exceptional, but who are experiencing some degree of difficulty within the school setting. In the area of assessment, both traditional and behavioral instruments are employed. In the area of intervention, the emphasis is on behavioral techniques.

Numerous sources are available which provide suggestions for specific interventions (e.g., Catterall & Gazda, 1978; Millman, Schaefer, & Cohen, 1980; Maher & Zins, 1987; Cummins, 1988; McCarney & Cummins, 1988.) Communications with school psychologists across the state had suggested, however, that each had identified interventions which proved to be particularly effective with specific problems and/or populations, although certainly there is unlikely to be any single intervention that will be the treatment of choice for all populations or all behaviors. Additionally, many school psychologists, in designing individualized interventions, had favorite stories of creative ideas that had worked in single, unique cases. The purpose of this study was to identify favored intervention techniques currently being implemented by school psychologists practicing in Louisiana.

In order to identify both traditional favorites and creative interventions, survey questionnaires were mailed to 147 persons on the 1988 membership list of the Louisiana School Psychological Association who had Louisiana addresses. Four were returned as undeliverable. From the remaining 143, 39 usable responses were returned, resulting in a 27% response rate. Questionnaires asked for (1) demographic data, including nature and location of employment setting, race, age, year degree completed, and

years experience, (2) estimated time spent serving specific groups, (3) estimated time devoted to specific tasks, and (4) specific examples of both traditional and creative behavioral interventions which the school psychologist found effective and, therefore, preferred when addressing problems exhibited by children classified as Behavior Disordered, Learning Disabled, and Mild Mentally Handicapped, as well as by regular education students. Responses were compiled to provide a description of current intervention practices in Louisiana schools.

Most of the respondents either were employed in schools (80%) or were university trainers (5%). Half (51%) were employed in combination rural/urban settings, while almost a third (31%) were employed in mostly rural settings. Fifty-nine percent were female and 41% were male; all were white. Three-quarters (74%) were between the ages of 30 and 49, with over half (59%) having completed Master's Degrees since 1980. Twenty-eight percent had completed doctoral degrees. Nearly half (44%) reported more than five years' experience, while one-fifth (21%) were in their first year of employment. Respondents estimated that nearly two-thirds of their time (62%) was spent serving children suspected of or clasified as being expectional, while one-fourth of their time (26%) was spent serving regular education students. Estimated time devoted

to specific categories of tasks suggested that most time was spent in assessment (39%), while decreasing amounts of time were spent in direct implementation of interventions with students (28%), consultation (14%), "other" tasks (12%), research and program evaluation (3%), and presenting inservices (2%).

Table 1 describes intervention preferences, both overall and by specific group. Numbers represent the percentage of respondents who mentioned the specific intervention at least once. The first column (under Total) considered all responses. The remaining columns represent the percentage of respondents who mentioned the specific intervention as preferred for addressing problems exhibited by Behavior Disordered, Learning Disabled, Mild Mentally Hanidapped, and regular education students, respectively.

Although neither are traditionally considered to be behavioral techniques, individual counseling and consultation were among the most frequently mentioned interventions. Individual counseling, in fact, was the intervention technique most frequently mentioned (46%). Some individuals who mentioned individual counseling as a preferred intervention identified the primary focus of the counseling, with 15% targeting self esteem and 10% targeting study skills. Social skills, problem solving, and vocational training were each identified as the focus

Table 1

Behavioral Interventions Preferred by School Psychologists in Louisiana

Intervention	Total	BD	LD	MMH	Reg.Ed.
Individual counseling	46	31	5	2	28
Self Esteem	15	2	2	5	8
Study skills	10	--	10	--	8
Social skills	8	2	2	--	5
Problem solving	8	5	5	2	--
Vocational training	8	--	--	8	--
Roleplay	5	2	2	2	--
Behavior modification (Gen.)	41	38	2	8	10
Reinforcement of appropriate behaviors/academic success	36	28	10	2	5
Consultation	33	26	2	13	20
CBA+adjusting curriculum to appropriate level	23	2	13	13	2
Peer tutoring	13	--	20	3	8
Parent tutoring	13	--	10	2	5
Report cards	13	5	--	--	8
More time for completion of assignments	10	--	8	2	8
Breaking assignments into smaller segments	10	--	10	2	5
Time out	26	20	--	8	--
Contracts	20	20	5	2	18
Punishment	12	5	2	5	--
Cognitive behavior modification (Gen.)	10	10	2	--	8
Self-monitoring	10	8	2	--	--
Self-instruction	8	5	2	--	2
Token economy	10	10	--	2	5
Group counseling	8	8	--	--	--
Response cost	5	5	--	--	5
Overcorrection	2	2	--	2	2
Relaxation	2	2	--	--	--

Numbers represent percentage of respondents who mentioned the specific intervention at least once (1)for total respondents, (2)for use with Behavior Disordered students, (3)for use with Learning Disabled students, (4) for use with Mild Mentally Handicapped students, and (5) for use with Regular Ed. students.

of individual counseling by 8% of the respondents, and roleplay by 5%.

The nature of interventions delivered through consultation, which was mentioned by 33% of the respondents, was identified in a similar manner, with curriculum based assessment leading to adjustment of the curriculum to the appropriate instructional level being mentioned by 23%, and peer tutoring, parent tutoring, and use of report cards sent home on a daily or weekly basis each being mentioned by 13%. Adjustment of time allowed for completion of assignments and of assignment size were each mentioned by 10%.

Forty-one percent of the respondents mentioned a preference for "behavior modification" without specifying a specific intervention technique. However, a preference for reinforcement of appropriate behaviors or academic success was mentioned by 36%, time out by 20%, contracts by 20%, punishment by 12%, and cognitive behavior modification by 10%. In addition to specifying a preference for cognitive behavior modification, 10% and 8% of the respondents indicated a preference for the specific cognitive behavior modification techniques of self-monitoring and self-instruction, respectively.

Tables 2 through 5 list the interventions preferred when addressing problems exhibited by each of the four

specified groups. Not surprisingly, more respondents identified interventions employed with Behavior Disordered students (see Table 2) than with any other group. Behavior modification was mentioned most often (38%). In descending order, other interventions preferred with these students were individual counseling (31%), reinforcement of appropriate behaviors (28%), consultation (26%), contracts (20%), and time out (20%).

Table 2
Behavioral Interventions Most Sucessful in Addressing Problems of Behavior Disordered Students

Intervention	Percent
Behavior modification (Gen.)	38
Individual counseling	31
Reinforcement of appropriate behaviors	28
Consultation	26
Contracts	20
Time out	20
Cognitive behavior modification (Gen.)	10
Token economy	10
Group counseling	8

The favorite intervention for problems exhibited by Learning Disabled students (see Table 3) was curriculum based assessment plus adjustment of the curriculum to an appropriate instructional level. This was mentioned by 13% of the respondents. Each of five other interventions were mentioned by 10%. These were reinforcement of academic success, counseling for study skills, breaking assignments into smaller segments, peer tutoring, and parent tutoring.

Table 3
Behavioral Interventions Most Successful in Addressing Problems of Learning Disabled Students

Intervention	Percent
CBA+adjusting curriculum to appropriate instructional level	13
Reinforcement of academic success	10
Counseling: study skills	10
Breaking assignments into smaller segments	10
Peer tutoring	10
Parent tutoring	10

Table 4
Behavioral Interventions Most Successful in Addressing Problems of Mild Mentally Handicapped Students

Intervention	Percent
Consultation (Gen.)	13
CAB+adjusting curriculum to appropriate instructional level	13
Behavior modification (Gen.)	8
Time out	8
Vocational training	8

With Mild Mentally Handicapped students (see Table 4), consultation and curriculum based assessment plus adjusting the curriculum to the appropriate instruction level were each preferred by 13% of the respondents, while behaivor modification, time out, and vocational training were each preferred by 10%.

Preferences for interventions employed to address problems exhibited by regular education students (see Table 5) were identified by more of the respondents than for those employed with either Learning Disabled or Mild Mentally Handicapped students. Preferences included individual counseling (28%), consultation (20%), contracts

(18%) and behavior modification (gen.) (10%).

Table 5
Behavioral Interventions Most Successful in Addressing Problems of Regular Education Students

Intervention	Percent
Individual counseling	28
Consultation (Gen.)	20
Contracts	18
Behavior modification (Gen.)	10
Cognitive behavior modification (Gen.)	8
More time for completion of assignments	8
Peer tutoring	8
Counseling: study skills	8
Counseling: self esteem	8

Examples of creative interventions suggested for each classification were as follows.

Behavior Disordered:

1. Self-monitoring to focus child's attention on certain specific behaviors. This may be accomplished by using a self-monitoring chart or other methods. For example, the father of an 8-year-old schizophrenic boy pinned a construction paper heart on his shirt to remind him to keep his hands to himself. He was to remove the heart if he did not.

2. Behavior modification with creative reinforcers, such as doughnuts, magazines, pizza, a white rat, lunch with the school psychologist or another school official.

3. Words written on cards, such as "Help me," if the teacher is alert, responsive, and able to attend to the various cues given by students in an agreed upon manner.

4. If students are not doing their homework in the afternoon after school, have the parent(s) get them up at 5:30 a.m. to do it in the morning before school. (A mother who worked 4:00 p.m. to midnight reported one-trial learning as a result of using this method.)

Learning Disabled:

1. Divide assignments into small segments to alleviate some of the stress LD students have in relation to academics. Have short-term goals with fewer objectives.

2. Pair an LD child with a well-liked honor student for tutoring. It will raise the LD child's self-esteem and will often help him/her make friends.

Mild Mentally Handicapped:

1. Instead of presenting the child with an entire page of work to complete, cut the page into fourths and give the pieces to the child to complete at different times throughout the day.

2. For severe/profound with inappropriate sexual behaviors, use a plant mister sprayed in the face as a punisher.

Regular Education Students:

1. A school phobic child was brought to school and physically separated from the mother. The mother arranged to be away from home, but was allowed to call the child during the day. The child had to be at school to receive

the call. Also, an alarm wristwatch was bought for the child. He could keep it as long as he was solely responsible for getting himself up, dressed, and on the bus.

2. For a suicidal five-year-old male, attendance was rewarded with time with the school psychologist, one class leadership activity per day, and Principal's Award for attendance. The teacher also reinforced and documented verbalizations of feelings.

References

Catterall, C. D., & Gazda, G. M. (1978). Strategies for helping students. Springfield, IL: Charles C. Thomas.

Cummins, K. K. (1988). The teacher's guide to behavioral interventions. Columbia, MO: Hawthorne.

Maher, C. A., & Zins, J. E. (1987). Psychoeducational interventions in the schools. New York: Pergamon.

McCarney, S. B., & Cummins, K. K. (1988). The pre-referral intervention manual. Columbia, MO: Hawthorne.

Millman, H. L., Schaefer, C. E., & Cohen, J. J. (1980). Therapies for school behavior problems. San Francisco: Jossey-Bass.

State of Louisiana Department of Education. (1983). Pupil appraisal handbook: Bulletin 1508. Baton Rouge, LA: SLDE.

This research was supported in part by Faculty Research Grant No. 724-19, Louisiana State University - Shreveport. The significant contributions and assistance of Graduate Research Assistant Kevin Jones are gratefully acknowledged.